	UTILITY PATEN TRANSMITTAL UI			A	TTO VEY DOCK	<b>KET 79189CEB</b>
	To: Assistant Commis	sioner for Patent		Express Ma	il Label No.	
	Box Patent Applic Washington, D.C.		<u> </u>	EL26710833	<u> </u>	
	TNJECTION MOLDING	APPARATUS FOR A Date: December 07, 199				1999
	NON-METALLIC INJECTION MOLD  First Named Inventor (or Application Identifier):  Carl E. Radzio, Jr. et al				,	e 🧱
				675 U.S. P.		
	Enclosed are:  1. X Specification				Assignment of the inve Eastman Kodak Com	
	2. 3 Sheet(s) of drawin	g(s)			Certified copy of a price	
	3. X Information Disclo	7. 8. Associate Power of Attorney				
	4. Combined Declaration for Patent Application and Power of Attorney:  4a. X New  4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)  5. Incorporation by Reference (useable if Box 4b is checked)  The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) named					
İ						
	which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).					
	application and is hereby incorporated by reference therein.					
	10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following:					
	CROSS REFERENCE TO RELATED APPLICATION					
	Reference is made to and priority claimed from U.S. Provisional Application Serial No., filed, entitled.					
	If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:					
	11. Continuation Divisional Continuation-in-part (CIP) of prior application No:					
	12. X Please address all written communications to Thomas H. Close, Patent Legal Staff,					
4	Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.					
	Please Direct all telephone calls to Clyde E. Bailey, Sr. at (716) 722-9349.					
	The filing fee has been calculated as shown below:  FOR: NO. FILED NO. EXTRA RATE FEE					
	BASIC FEE				\$ 7	760
	TOTAL CLAIMS	10 - 20 =	0	x 18 =		\$ 0
	INDEPENDENT CLAIMS  MULTIPLE DEPENDEN	1   - 3 = JT CLAIM PRESEN	TED 0	x 78 =  + 260	·····	\$0
	MODITI EE BEI EN BEI	VI CERMINI I RESERV	120	TOTA		760
	X Please charge my Eastman Kodak Company Deposit Account No. <u>05-0225</u> in the amount of \$ 760.  A duplicate copy of this sheet is enclosed					
	X The Assistant Commissioner is hereby authorized to charge any additional filing fees required under					
	37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.					
	A duplicate copy of this sheet is enclosed.					
	Clyde E. Bailey, Sr./clz Attorney for Applicants					

Clyde E. Bailey, Sr./clz Telephone: (716) 722-9349 Facsimile: (716) 477-4646 Attorney for Applicants Registration No. 34,117